chromatolysis; the nucleus occupied an eccentric position. In a few cases the nucleus was centric with some perinuclear chromophilic substance, but about this the chromatolysis was marked.

Following Marinesco's studies, the author shows that the lesions in the greater number of affected cells were similar to those seen after lesions of the peripheral nerves, and therefore secondary and not like those found when the lesion is a primary one, such as is seen in the case of the acute intoxications. The author interprets the lesion as primary in those cells, fewer in number, in which the nucleus remained central with perinuclear chromatolysis. JELLIFFE.

88. SUR L'ABSENCE D'ALTÉRATION DES CELLULES NERVEUSES DE LA MOELLE ÉPINIÈRE DANS UN CAS DE PARALYSIE ALCOOLIQUE EN VOIE D'AMÉLIORATION (Absence of Alteration of the Nerve Cells of the Spinal Cord in a Case of Alcoholic Paralysis in Process of Amelioration). Dejerine et Thomas (Comptes Rendus Hebdomaires des Séances de la Société de Biologie, 4, May 1st, 1897).

Dejerine and Thomas report a case of alcoholic paralysis of the inferior limbs with muscular atrophy; hyperæsthesia of the skin and muscles; talipes equinus; loss of patellar reflex; lesions of the cutaneous and muscular nerves of the lower limbs, consisting of empty nerve sheaths, and diminution in the number of large medullated fibres, without evidences of Wallerian degeneration. The anterior and posterior roots, the white matter and cells of the cord, appeared to be normal.

The writers think that the absence of the cellular lesions may have been due to the fact that the reaction of the cell body had ceased, the condition of the peripheral nerves being one of amelioration, although the power of motion was still much affected. The findings show, however, that in peripheral neuritis the nerves may be much altered without the presence of appreciable changes in their cell bodies. It is wise to maintain a certain reserve in judging of the importance of chromatolysis in the nerve cells, for, while it occurs after infectious processes or intoxications, it does not seem to have great significance. Goldscheider and Flatau have recently shown experimentally that pronounced cellular alterations may be found in animals which have presented no symptoms during life. These lesions are temporary, and the restoration of the nerve cell to a normal condition is very rapid. According to Goldscheider and Flatau, the corpuscles of Nissl are not of vital importance, and their physiological significance is unknown. Jacottet has noticed an absence of paralytic phenomena in animals intoxicated by different substances in which chromatolysis was found at the autopsy. Chromatolysis is, therefore, of interest cytologically, but is not of physiological importance. SPILLER.

CLINICAL NEUROLOGY.

89. A CASE OF "LANDRY'S" PARALYSIS WITH AUTOPSY. T. Diller and A. Meyer (American Journal of the Medical Sciences, III, p. 104).

This case occurred in a female, fifty-three years of age, who was suddenly taken ill with paralysis of the legs, which was followed after three days by weakness of the arms, the bladder and intestinal canal. Three months later the patient died with bulbar symptoms, a gradual paralysis of the extremities having developed in the meanwhile. The patellar reflex was lost, but the sensations remained normal. Death was due to respiratory paralysis.

The microscopical investigation showed a slight sclerosis in the crossed pyramidal tracts. The spinal roots were intact, and the author describes a pigmentation of the ganglion cells of the anterior horns. He concludes that the symptoms suggest a classification into two groups.

(1) In children, where the disease is termed acute anterior poliomyelitis.

(2) In older patients, when polyneuritis is accompanied by a special disease of the peripheral nerves, and Landry's paralysis with marked spinal symptoms. Jelliffe.

90. Infectious Causation of Landry's Symptom. Remlinger (Med. Week, 5, 1897, Nov. 5).

At the Biological Society of Paris, the author recalled a case previously reported by him of an acute ascending paralysis in which the streptococcus was detected in the spinal substance by cultivation, and was also found in stained sections.

In experimenting on the subject Dr. Remlinger has succeeded in producing acute ascending paralysis in a rabbit in which cultivation tests furnished evidence of the presence of the inoculated microbe in the cord. The microbe was a micrococcus derived from septic abscesses in a human patient. Dr. Remlinger thinks his successful production of ascending paralysis in this case is an additional argument in favor of the infective nature of its causation. Mitchell.

91. Paralysie ascendante aigue (Acute Ascending Paralysis). Hirtz et Lesné (La Presse Médicale, 5, 1897, p. 269).

The case described occurred in a woman of 22, beginning suddenly while she was in the third month of a so far normal pregnancy. The symptoms were first acute and then chronic. The disease lasted about four months, being then terminated by the death of the patient from broncho-pneumonia. Two weeks before death, there was premature delivery, the child living but a few minutes. From this, however, the patient rallied quite well. There was complete paralysis of both lower extremities, and of the right upper extremity, with paresis of the left arm and of the back muscles. The respiratory muscles, and those of the face, tongue, palate, pharynx, and larynx remained intact. The paralyzed muscles showed no reaction of degeneration, but the tendon reflexes were lost. Sensibility was present, and the muscles of the lower extremities were very tender, and the seat of severe pains, increased on movement.

A clear liquid, withdrawn by lumbar puncture two hours after death, proved sterile. The brain and the peripheral nerves showed nothing abnormal. The vessels of both spinal pia mater, and cord proper, were greatly dilated, and their walls infiltrated with leucocytes. This was specially marked in the anterior horns about the ganglion cells. These latter were much altered, especially in the lumbar region, some having disappeared, others being shrunken and their nuclei displaced; others, again, hypertrophied. Above the cervical enlargement the cells were normal, and the vascular lesions disappeared in the bulb. There was no degeneration in the columns of the white matter.

C. L. Allen.

92. Zur pathologischen Anatomie und Aetiologie der acuten aufsteigenden Spinalparalyse—Landry (On the Pathological Anatomy and the Etiology of Landry's Paralysis). L. Krewer (Zeits. f. Klin. Med., 32, 1897, p. 115).

Since 1893 the author has observed four cases of Landry's paralysis, in three of which he was enabled to perform autopsies. In his